| STATEMENT OF ORGANIZATION   |                           | OFFICE USE ONLY  Report Number: 50649                           |
|---|---------------------------|---|
| Name and Address of Committee   | 2. Date of this Statement | Report Number: 50649  Date Filed: 9/24/2015                     |
| ROBERT J CARTER CAMPAIGN COMMITTEE  | 9/23/2015                 |   |
| Post Office Box 27<br>Greensburg, LA 70441  | 3. Estimated Membership   |   |
|   | 2                         |   |
| Check If:   | 4. Amended Statement?     |   |
| New Committee   | YesX_No                   |   |
| All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)     a. <u>Name</u> b. <u>Position</u> c. <u>Address</u> |                           |   |
| ROBERT J CARTER Chairperson   | Post Office Box 2         | 7   |
|   | Greensburg, LA 7          | 0441  |
| RUSSELL C MONROE Treasurer  | Post Office Box 1         | 76  |
|   | Ponchatoula, LA           | 70454   |
|   |                           |   |
| 6. Affiliated Organizations  (Any organization other than a political committee which directly or indirectly established administers or financially supports this committee.)           |                           |   |
| a. <u>Name</u> b. <u>Address</u>  |                           | c. Relationship to Committee                                    |
|   |                           |   |
| 7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)                         |                           |   |
| a. <u>Name</u> b. <u>Address</u>  |                           |   |
| On attached sheet   |                           |   |
| 8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: X Principal Campaign Committee Subsidiary Committee   |                           |   |
| b. Name of Candidate ROBERT CARTER  | c                         | Office Sought by the Candidate State Representative District 72 |
| 9. a. Name of Person Preparing Report DENNIS E JAMES, CPA   |                           |   |
| b. Daytime Telephone 985-345-6262   |                           |   |
| 10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.                        |                           |   |
| This 24th day of September , 2015 .   |                           |   |
|   |                           |   |
| Robert J Carter Signature of Committee/Chairperson  |                           | 225-222-4191 Daytime Telephone                                  |
|   |                           |   |
| Russell C Monroe Signature of Committee Treasurer, if any   |                           | <br>Daytime Telephone   |

Form 200, Rev. 12/03

- 7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)
  - a. <u>Name</u> b. <u>Address</u>

LANDMARK BANK 31 Kendrick Street
Greensburg, LA 70441